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23410 7590 06/23/2009
Vista IP Law Group LLP
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Jocelyn L. Lee	(Depositor's name)
/Jocelyn L. Lee/	(Signature)
9/14/09	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/727,149	12/02/2003	David K. Swanson	03-0078 (US01)	5299
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TITLE OF INVENTION: SURGICAL METHODS AND APPARATUS FOR MAINTAINING CONTACT BETWEEN TISSUE AND ELECTROPHYSIOLOGY ELEMENTS AND CONFIRMING WHETHER A THERAPEUTIC LESION HAS BEEN FORMED

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	09/23/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
PEFFLEY, MICHAEL F	3739	606-049000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE
BOSTON SCIENTIFIC
SCIMED, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
Maple Grove, MN

Please check the appropriate assignee category or categories (will not be printed on the patent) : ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Gary D. Lueck/
Typed or printed name Gary D. Lueck

Date 9/14/09
Registration No. 50,791

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